DEPARTMENT POLICY

MA Only

This item explains the MA disability and blindness factors.

EXHIBIT I in this item contains definitions of disability, substantial gainful activity and blindness.

A person meets the disability or blindness factor for a month if he is determined disabled or blind for the month being tested.

In addition, a disabled person does **not** meet the disability requirement if he refuses treatment without good cause; see Treatment Requirement (Disability Only) in this item.

DISABILITY/ BLINDNESS ESTABLISHED

Death

Death establishes a person's disability for the month of his death.

Eligible for SSI

See BEM 150 if a person is receiving Supplemental Security Income (SSI).

Recently Eligible for SSI

If SSI eligibility based on disability or blindness was terminated due to **financial** factors, continue medical eligibility for MA. Medical development and DDS certification are **not** initially required. Schedule a medical review 12 months from the date of SSI termination; see BAM 815.

Note: The client must meet all financial and other nonfinancial factors for SSI-related MA.

Eligible for RSDI

A person eligible for Retirement, Survivors and Disability Insurance (RSDI) benefits based on his disability or blindness meets the disability or blindness criteria. Disability or blindness starts from the RSDI disability onset date established by the Social Security

Administration (SSA). This includes a person whose entire RSDI benefit is being withheld for recoupment. No other evidence is required.

RSDI Eligibility Established After MA Denial

Process a previously denied application as if it is a pending application when all of the following are true:

- The reason for denial was that the DDS determined the client was not disabled or blind, and
- The Social Security Administration (SSA) subsequently determined that the client is entitled to RSDI based on his disability/ blindness for some or all of the time covered by the denied MA application.

Follow MA policies including verification of income, assets and receipt of RSDI based on disability/blindness. All eligibility factors must be met for each month MA is authorized.

Note: If more than one MA denial notice was issued prior to the date the client informs DHS of the RSDI approval, determine eligibility beginning with the oldest application and its retro MA months.

Example:

April 2	Ms. G applied for MA including retro MA for January, February and March.
May 15	MA denied because the DDS determined Ms. G was not disabled.
August 4	Ms. G informs DHS that SSA approved her for RSDI based on disability. Ms. G's RSDI disability onset date is February 1.

Determine MA eligibility as if the April 2 application and associated retro application are still pending. Note that Ms. G. still does **not** meet the disability factor for January.

DISABILITY/ BLINDNESS DETERMINATIONS AND REFERRALS

Not Eligible For RSDI

If the client is **not** eligible for RSDI based on disability or blindness:

• The Disability Determination Service (DDS) certifies disability and blindness.

Exception: The Social Security Administration's (SSA's) final determination that the client is **not** disabled/blind for SSI, **not** RSDI, takes **precedence** over an DDS determination; see **Final SSI Disability Determination** in this item.

Final SSI Disability Determination

SSA's determination that disability or blindness does **not** exist for SSI is **final** for MA if:

- The determination was made after 1/1/90, and
- No further appeals may be made at SSA; see EXHIBIT II in this item, or
- The client failed to file an appeal at any step within SSA's 60 day limit, and
- The client is **not** claiming:
 - •• A totally different disabling condition than the condition SSA based its determination on, **or**
 - •• An additional impairment(s) or change or deterioration in his condition that SSA has **not** made a determination on.

Eligibility for MA based on disability or blindness does **not** exist once SSA's determination is **final**.

DDS

A client not eligible for RSDI based on disability or blindness must provide evidence of his disability or blindness.

Do all of the following to make a referral to the DDS:

•

 Obtain an DHS-49-F, Medical-Social Questionnaire, completed by the client.

Note: The DDS will determine disability/blindness for retro months even if retro MA is **not** requested by the client at application. If the client subsequently applies for retro MA, refer to the DHS-49-A, Medical/Social Certification, for the disability determination for those retro months.

BAM 815 contains the procedures to process the medical determination.

Do **not** refer the client for a medical determination if the case contains a valid DDS certification. **Valid** means **all** of the following:

- SSA's determination that the client is **not** disabled or blind for SSI purposes is **not final** as defined in this item.
- The medical review is **not** due or past due.
- The client continues to be unable to engage in substantial gainful activity.
- The client's condition is the same.

Client Cooperation

The client is responsible for providing evidence needed to prove disability or blindness. However, assist the customer when they request or need help to obtain it. Such help includes the following:

- Scheduling medical exam appointments
- Paying for medical evidence and medical transportation

See BAM 815 and BAM 825 for details.

A client who refuses or fails to submit to an exam necessary to determine disability or blindness **cannot** be determined disabled or blind and you should deny the application or close the case. It is not necessary to return the medical evidence to DDS for another decision in this instance.

Hearings

Requests for administrative hearings regarding DHS determinations, such as DDS denials or the calculation of a deductible amount, are heard by DHS.

However, DHS **cannot** conduct hearings regarding the issue of disability or blindness when SSA made the determination. These requests must be filed at SSA.

If a client or authorized hearings representative (AHR) insists upon requesting a DHS hearing regarding the disability or blindness issue **and** SSA made the determination:

- Forward the request and completed hearing summary to Michigan Administrative Hearings System (MAHS). Include a statement on the hearing summary indicating the hearing request should be denied because the disability or blindness denial was SSA's determination. MAHS will deny the request.
 - Negative action must take effect and remain in effect if SSA's determination is final as defined under Final SSI Disability Determination in this item.

See **DEFINITIONS** in the Bridges Policy Glossary (BPG). Also see Denial of a Hearing Request in BAM 600 if the request includes an issue(s) in addition to disability/blindness.

Treatment Requirement (Disability Only)

The DDS evaluates each disability case for treatment.

Notify the client when the DDS orders treatment. The client **must** undergo the treatment, unless he has good cause **not** to. The DDS decides if the client has good cause to refuse treatment.

Exception: Do **not** apply the treatment requirement to clients eligible for RSDI based on disability.

Treatment is:

 Vocational rehabilitation, including basic education and job training attempts to alleviate the impairment(s), including physical therapy, diet, mental health services, substance abuse therapy and limited surgery.

Good cause to refuse treatment includes such things as:

- Conflict with religious belief.
- Unusual health risks.
- Lack of transportation.
- Inability to pay treatment costs.

Trial Work Period (Disability Only)

A trial work period of three months allows disabled clients to test their ability to work. Any work done during the trial work period may **not** be used as evidence the person can engage in substantial gainful activity. (EXHIBIT I in this item explains substantial gainful activity.)

Refer the case to the DDS when a disabled client starts working and claims they are still disabled.

The DDS determines if the client is still disabled and a trial work period applies.

DDS Review of Disability or Blindness

Refer the client to the DDS to determine continued disability or blindness when **any** of the following occurs:

- The client is no longer eligible for RSDI based on disability or blindness.
- An administrative law judge requires a review.
- The DDS requires a review.

Note: The DDS records a review date on the DHS-49-A, Medical-Social Eligibility Certification, when they certify disability or blindness. Forward a client completed DHS-49-F, Medical-Social Questionnaire, to the DDS to complete the review. Allow enough time before the due date to enable the DDS to process the review.

- SSA determines the client is **not** disabled or blind for SSI purposes and the client claims either of the following:
 - A totally different disabling condition other than the one upon which SSA based its determination.

 An additional impairment(s), change, or deterioration in his condition that SSA has **not** reviewed.

Also refer a disabled client to the DDS to determine continued disability when the client:

- Is working but claims to still be disabled.
- Completes treatment.
- Has improved health.
- Refuses treatment.

Describe what has happened in a memo to the DDS. Send the evidence of impairment in the case record. If a referred client refuses treatment, include an explanation of efforts made to involve him/her in treatment. The DDS will request any additional evidence needed.

VERIFICATION REQUIREMENTS

At application and redetermination, verify any of the following that apply to the case:

- Eligibility for RSDI based on disability or blindness
- Death
- DDS certification of disability or blindness when all of the following are true:
 - Client is **not** eligible for RSDI based on disability or blindness.
 - •• Client is **not** deceased.
 - •• SSA's determination that the client is **not** disabled or blind for SSI purposes is **not final**.

Verify filing of timely appeal when SSA has determined a client is **not** disabled or blind for SSI purposes.

Sources of Verification

Receipt of RSDI based on disability/blindness:

- Correspondence from SSA.
- SOLQ.

- Telephone contact with SSA.
- BENDEX (disability only). (Report coding does **not** distinguish blind from the disabled.)
- SSA-1610.

Death:

- Death certificate.
- Newspaper clipping.
- Funeral bill.
- Other document specifying date of death.

DDSSRT Certification:

- DHS-49-A, Medical-Social Eligibility Certification, based on:
 - •• DHS-49, Medical Examination Report.
 - •• DHS-49-D, Psychiatric/Psychological Examination Report.
 - •• DHS-49-E, Mental Residual Functional Capacity Assessment.
 - DHS-49-F, Medical-Social Questionnaire.
 - •• DHS-49-I, Eye Examination Report.
 - Other equivalent narrative reports.
- Medical evidence of disability must be based on the findings of an M.D. or D.O. or fully licensed psychologist.

Note: Any medical evidence of disability submitted by a Physician's Assistant must be co-signed by an M.D. or D. O.

- Medical evidence of blindness must be based on the findings of a(n):
 - •• Board-certified ophthalmologist.
 - Licensed optometrist.
 - M.D. or D.O. resident in ophthalmology.
 - •• M.D. or D.O. eligible to pass board in ophthalmology.

Timely appeal at SSA:

Copy of SSI appeal form (SSA-561 or HA-501).

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- SOLQ.
- HR-070.
- Correspondence from SSA.
- Documented contact with SSA.
- Legal documents indicating appeal filed.

Bridges

Enter the medical review date (MRDT) set by the DDS or administrative law judge.

EXHIBIT I DISABILITY,
SUBSTANTIAL
GAINFUL ACTIVITY
AND BLINDNESS

Disability

A person is **disabled** when **all** of the following are true:

- He has a medically determined physical or mental impairment.
- His impairment prevents him from engaging in any substantial gainful activity.
- His impairment
 - Can be expected to result in death, or
 - Has lasted at least 12 consecutive months, or
 - Is expected to last at least 12 consecutive months.

Substantial gainful activity means a person does ALL of the following:

- Performs significant duties, and
- Does them for a reasonable length of time, and
- Does a job normally done for pay or profit.

Significant duties are duties used to do a job or run a business. They must also have a degree of economic value. The ability to run a household or take care of oneself does **not**, on its own, constitute substantial gainful activity.

A child under age 18 is **disabled** when he suffers from a medically determined impairment(s) of comparable severity. Significant duties for a child include age-related tasks and abilities.

Blindness

A person is determined **blind** when either:

- The visual acuity in his better eye can only be corrected to 20/200 or less, or
- The widest diameter of the visual field in his better eye is limited to an angle 20 degrees or less.

EXHIBIT II GENERAL INFORMATION ABOUT THE SSA APPEALS PROCESS

When the Social Security Administration (SSA) determines that a client is **not** disabled/blind for SSI purposes, the client may appeal that determination at SSA.

The **SSA Appeals Process** consists of 3 steps:

- Reconsideration (If initial application filed prior to October 1, 1999).
- 2. Hearing.
- 3. Appeals Council.

SSA has no time limits for making decisions on appeals.

The client, however, has **60 days** from the date he receives a denial notice to appeal each of the following SSA actions:

- Determinations.
- Reconsiderations.
- Hearings.

Reconsideration is filed at the Social Security Administration. A DDS employee, other than the one who decided the client was **not** disabled/blind, reviews the determination. Most reconsiderations uphold the original decision.

A reconsideration is **not** completed for SSI applications filed after October 1, 1999.

Hearings are conducted by an administrative law judge (ALJ). The ALJ renders a new decision based on a review of the material, questions asked at the hearing, testimony of witnesses and new evidence submitted.

Appeals Council can deny or dismiss an appeal from the hearings level, **or** grant the request by issuing a new decision or remanding the case back to an ALJ. Most appeals are denied or dismissed at this step.

If the Appeals Council upholds the ALJ's decision, there are no further appeals at SSA. The client may contest SSA's decision at the appropriate federal district court.

EXHIBIT III - SSI DENIAL AND APPEAL CODES ON THE HR-070

The HR-070, SSI Update Report, is produced at least once a week. Part 2 of the report contains SSI denial and appeal codes.

SSI disability/blindness denial codes are:

•	N07	•	N30	•	N35	•	N44
•	N08	•	N31	•	N40	•	N45
•	N15	•	N32	•	N41	•	N46
•	N16	•	N33	•	N42	•	N51
•	N27	•	N34	•	N43		

Relevant appeal codes are:

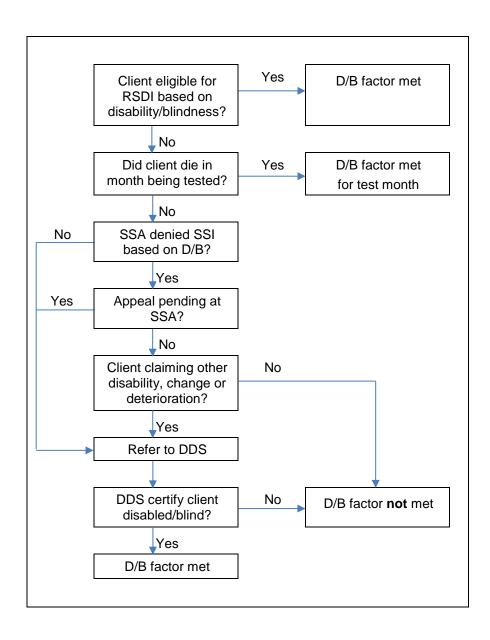
Appeal request filed

- A (reconsideration).
- •• P (hearing).
- W (appeals council).

• Appeal dismissed, denied or withdrawn

- B Dismissed or withdrawn (reconsideration).
- C Prior decision affirmed (reconsideration).
- Q Dismissed or withdrawn (hearing).
- R Prior hearing decision reaffirmed (hearing).
- X Withdrawn or dismissed (appeals council).
- Y Prior decision affirmed (appeals council).

EXHIBIT IV MEETING THE MA
DISABILITY/
BLINDNESS (D/B)
FACTOR



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LEGAL BASE

MA

Disability

42 CFR 435.540, .541 MCL 400.106

Blindness

42 CFR 435.530, .531 MCL 400.106